DECLARATION AND POWER OF ATTORNEY FOR UNITED STATES PATENT APPLICATION

×	Original		Supplemental		Substitute		
As a below named inventor, I hereby declare that:							
Му	residence, post of	fice address and	citizenship are as stat	ed below next to my	name, and		
and	joint inventor (if r	nore than one na		f the subject matter	w) or an original, first which is claimed and		
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the	specification of wh	nich:					
×	is attached he	reto.					
	was filed on	(day/moi	as Applicat	ion No.			
	and, if this box	k (□) contains ar	×				
	☐ was a	mended on (da	ay/month/year)				
	was filed as P	was filed as Patent Cooperation Treaty international Application No.					
		 	on (day/month/ye	ear)			
	and, if this box (□) contains an 🌣						
	entered the national stage in the United States and was accorded Application No.						
	and, if this box	x (□) contains ar					
	□ was a	mended, subseq	uent to entry into the r	national stage, on	(day/month/year)		

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment(s) referred to above and, if this application was filed as a Patent Cooperation Treaty international application, by any amendments made during the international stage (including any made under Patent Cooperation Treaty Rule 91, Article 19 and Article 34).

I acknowledge my duty to disclose all information which is known by me to be material to the patentability of this application as defined in 37 C.F.R. § 1.56.

I hereby claim the benefit under 35 U.S.C. §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate listed below and under 35 U.S.C. §365(a) of any Patent Cooperation Treaty international application(s) designating at least one country other than the United States listed below and have also listed below any foreign application(s) for patent or inventor's certificate and Patent Cooperation Treaty international application(s) designating at least one country other than the United States for the same subject matter and having a filing date before that of the application the priority of which is claimed for that subject matter:

COUNTRY/REGION (OR P.C.T.)	APPLICATION No.	FILING DATE (day/month/year)			IMED		
Great Britain	9906882.7	GB	X	Yes		No	
				Yes		No	
				Yes		No	
				Yes		No	
				Yes		No	
I hereby claim the benefit under 35 U.S.C. § 119 (e) of any United States provisional application(s) listed below:							
APPLICATION NO.		FILING DATE					

I hereby claim the benefit under 35 U.S.C. §120 of any United States application(s) listed below and under 35 U.S.C. §365(c) of any Patent Cooperation Treaty international application(s) designating the United States listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in said prior application(s) in the manner required by the first paragraph of 35 U.S.C. §112, I acknowledge my duty to disclose all information known to me to be material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date(s) of the prior application(s) and the national or Patent Cooperation Treaty international filing date of this application:

United States	United States	Status (Pending,	Interna	International	
Application No.	Filing Date	Abandoned or U.S.	Application No.	and Filing Date	
	(day/month/year)	Patent No.)		(day/month/year)	

PCT/EP00/02605 Pending

23.03.2000

I hereby appoint the registered practitioners associated with Customer No. 001095, respectively and individually, as my attorneys and agents, with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

If these brackets contain an X [X], I hereby authorize the registered practitioners associated with Customer No. 001095 and any others acting on my behalf to take any action relating to this application based on communications from the Patents and Trademarks Division of Novartis Pharma AG, Basle, Switzerland, or an affiliate thereof or a successor thereto, without direct communication from me.

Please address all communications to the address associated with Customer No. 001095, which is currently Thomas Hoxie, Novartis Corporation, Patent and Trademark Department, 564 Morris Avenue, Summit, NJ 07901-1027.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. §1001 and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full name of sole or first joint inventor

Raymond Bernasconi

Residence

4104 Oberwil, Switzerland

Citizenship **Switzerland**

Post Office Address Amselstrasse 17A, 4104 Oberwil,

Switzerland

IMPORTANT: Before this declaration is signed, the patent application (the specification, the claims and this declaration) must be read and understood by each person signing it, and no changes may be made in the application after this declaration has been signed.

Full name of second joint inventor, if any	Uwe Otten		
Inventor's signature	x Mun pen.	Date -	3. 8. 200 (day/month/year)
Residence	4051 Basel, Switzerland		
Citizenship	Germany		
Post Office Address	Eulerstrasse 1, 4051 Basel, Switzerland		
Full name of third joint inventor, if any			
Inventor's signature		Date -	(day/month/year)
Residence			
Citizenship			
Post Office Address			
Full name of fourth joint inventor, if any			
Inventor's signature		_ Date	
			(day/month/year)
Residence			
Citizenship			
Post Office Address			